

September 28, 2021  
Meeting Packet

# Meeting Agenda

**BIDMC Community Benefits Advisory Committee (CBAC)  
Annual Community Benefits Public Meeting**

**Tuesday, September 28, 2021**

**5:00 PM – 7:00 PM**

**[Zoom Registration Link](#)**

I. 5:00 pm – 5:05 pm	<b>Welcome and Introductions</b>
II. 5:05 pm – 5:20 pm	<b>Public Comment</b>
III. 5:20 pm – 5:50 pm	<b>Community-based Health Initiative Updates</b>
IV. 5:50 pm – 6:10 pm	<b>FY 21 Community Benefits Program Updates</b>
V. 6:10 pm – 6:55 pm	<b>FY 22 Community Health Needs Assessment</b>
VI. 6:55 pm – 7:00 pm	<b>Next Steps and Adjourn</b>

**Next Meeting: December 14, 2021**

# Meeting Slides

# BIDMC Community Benefits Annual Public Meeting

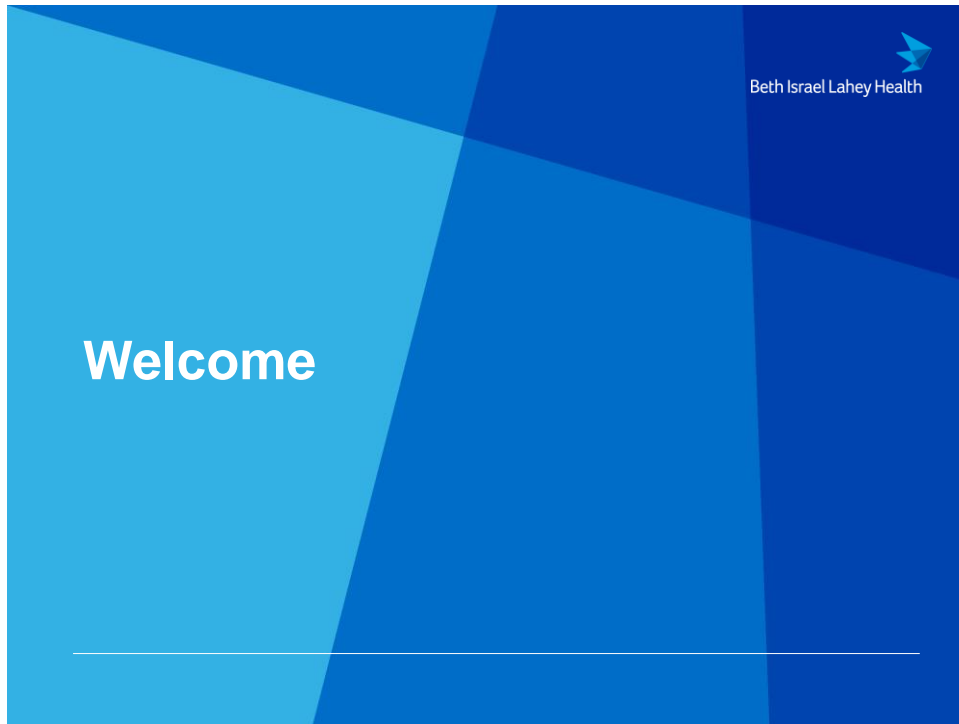
September 28, 2021



## Housekeeping



- Please join the meeting using video (if possible)
- If you lose your connection, please call in
  - Phone number: 1-301-715-8592
  - Meeting ID: 947 6462 3664
- Everyone will be muted upon arrival
- Please use the chat function for requests to be unmuted, to ask questions, or to make comments
- Our Zoom moderator is Anna



## Content



- Welcome and Introductions
- Public Comment
- Community-based Health Initiative Updates
- FY 21 Community Benefits Program Updates
- FY 22 Community Health Needs Assessment

## Welcome New CBAC Members!



**Maia Betts**  
The Dimock Center  
Chief Behavioral Health  
Officer



**Alberte Altine-Gibson**  
Bowdoin Street Health Center  
Community Health Manager



**Kira Khazatsky**  
Jewish Vocational Service  
Chief Operating Officer

## Community Benefits Service Area and Priorities



### Health Priorities:

- Social Determinants of Health (SDOH)
- Chronic Disease Management and Prevention
- Access to Care
- Behavioral Health

### Priority Cohorts:

- Older Adults
- Youth/adolescents
- Racially/Ethnically Diverse/LEP
- Low-Income
- LGBTQIA+
- Families affected by incarceration and/or violence



# Public Comment

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# Community-based Health Initiative Updates

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## Community-based Health Initiative (CHI) Guiding Principles and Tracks



### Categories of grant funding:

1. Housing Affordability
2. Jobs & Financial Security
3. Behavioral Health
4. Healthy Neighborhoods (separate funding/grant process)

### Different Funding Tracks

1. Cross-Sector Partnerships for Systems Change (\$1M over 3 years)
2. Focused Investment (\$500K over 3 years)
3. Capacity Building Seed Funding (\$100K over 3 years)



**IMPACT**  
Support evidence-based programs and strategies



**COMMUNITY**  
Build community cohesion and capacity



**HEALTH AND RACIAL EQUITY**  
Work towards the systemic, fair and just treatment of all people



**SUSTAINABILITY**  
Encourage sustained program impact



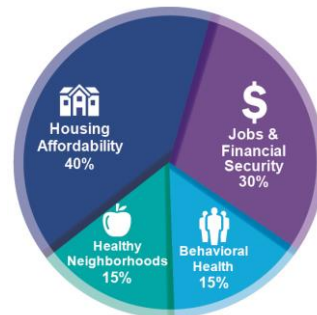
**UPSTREAM**  
Address the fundamental causes of poor health and racial inequities

## Community-based Health Initiative (CHI) Funding Priority Areas



Investing \$18.4M\* over five years to impact upstream causes of health disparities

Priority Need	Total Funding	Awarded
Housing	\$7.4M	\$2.85M
Jobs/Financial Security	\$5.5M	\$2M
Behavioral Health	\$2.8M	\$1.8M
Healthy Neighborhoods	\$2.8M	\$800k



For a list of grantees and additional background, visit [bidmc.org/chi](http://bidmc.org/chi)

\* Note: additional ~\$240K will be added to current CHI priorities for CT scanner DoN

## Boston Grantees Updates



- Progress reports submitted (including logic models and evaluation plans)
  - + In general, grantees appreciated the 6-month planning time and felt the process increased their evaluation capacity
  - Recruitment and hiring have been a challenge, COVID-19 has necessitated some plan alterations
  - Δ More networking time (planning an event for October)
- First quarterly data submissions (Tracks 1 and 2) will be due in October
- Annual reports to BIDMC due October 15

# Latino Community Action Response Team (*Latino CART*)





### o What is *Latino CART* ?

A program design to provide clinical intensive case management exclusively to uninsured and underinsured Chelsea immigrant residents

## *What is the primary goal for Latino CART?*

- o Teach appropriate coping skills and response strategies that will allow them to **THRIVE** within their community
  - o Explore and problem solving barriers
  - o Identify community resources (social, cultural and health-related resources)
  - o Guide and connect to community resources
  - o Encourage independence

# Transition Indicator Tool

<b>Knowledge and Confidence:</b>	Definitely False (0)	Probably False (1)	Probably True (2)	Definitely True (3)
I am aware of resources in my community that can help me and my family with our basic needs such as food, or housing.				
I know how to access resources in my community that can help me and my family with our basic needs, such as food, or housing.				

<b>Natural Support Connections:</b>	Definitely False (0)	Probably False (1)	Probably True (2)	Definitely True (3)
I feel that there is no one I can share my most private worries and fears with.	0	1	2	3
There is someone I can turn to for advice about handling	0	1	2	3

<b>Individual Wellbeing/Thrive:</b>	Strongly Disagree	Disagree	Neutral	Agree
I tend to bounce back quickly after hard times.	1	2	3	4
I have a hard time making it through stressful events.	5	4	3	2



- Lack of long-term resources
- Waitlist

## Successes

- Latino CART is well known
- Continuity of care throughout pandemic
- Fill gaps in services

Coming together  
is a beginning;  
keeping together  
is progress;  
working together  
is success.

Henry Ford

### Healthy Neighborhoods Initiative Healthy Bowdoin Geneva



- Received a planning grant of ~\$35,000
  - Working with All Aces during the community engagement phase
  - In addition to the 3 community meetings, they plan to hold 4 focus groups and field a community survey
  - Stipends will be provided to focus group participants
- Evaluation working group is collaborating with MXM Research Group
  - Process evaluation plan is complete and data collection has started
- Planning period expected to continue until October 15, 2021

## Healthy Neighborhoods Initiative

### We're Here for You: Fenway/Kenmore



- Working with JSI on community engagement planning; JSI has shared useful planning tools
- Met as a Collective in August to finalize plans for community engagement, including the timing and outreach for the public meetings
- In addition to the 3 community meetings, they plan to hold focus groups and field a community survey
- Evaluation working group is collaborating with MXM Research Group
  - Process evaluation plan is complete and data collection has started

# FY 21 Community Benefits Program Updates

## Bowdoin Street Health Center Program Updates Increasing Access to Healthy Food



- **Food for Health delivery program**
  - September 2020- August 2021
  - Over 125 participants
  - Food boxes contained produce and other staples
- **Food Prescriptions/SNAP Enrollment & Other**
  - Bowdoin Bucks/Baby Bucks (1,000 families 3,300 individuals)
  - SNAP Enrollment
  - UFI CSA
  - Fresh Truck
  - Fair Foods Coupon
  - Farmers Market Coupons



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## Bowdoin Street Health Center Program Updates Norton/Stonehurst Community Garden



- Received a grant for garden restoration
- Connected with Trustees and current residents/gardeners to renovate



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Beth Israel Deaconess Medical Center

## YMCA & BIDMC YOUTH VOICE ADVISORY BOARD

**ENGAGE.  
CONNECT.  
EMPOWER.**



Beth Israel Lahey Health  
Beth Israel Deaconess Medical Center

## THE WHY?

Youth are traditionally underrepresented in community health efforts

Elevate and center the youth voice in prioritizing health needs and strategies

Pilot a new model for engaging and working with youth, in partnership with an organization that has expertise in youth development

If the pilot is successful, the model can be applied to other initiatives to continue engaging with youth





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Beth Israel Deaconess Medical Center

## YOUNG PEOPLE HAVE A SEAT AT THE TABLE

This program will meaningfully engage with youth from BIDMC's Community Benefits Service Area to inform its' Community Health Needs Assessment and Implementation Strategy prioritization.

### Topics will include:

- Role of healthcare organizations in the community
- Health equity
- Social determinants of health
- Community engagement



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Beth Israel Deaconess Medical Center

## EMPOWERING YOUNG PEOPLE FOR A GREATER GOOD

### Youth will:

- Gain workforce skills
- Learn about community health, the role of healthcare institutions, and how they can be involved in their local communities
- Engage with their peers and contribute to primary data collection and prioritization



**THOUGHTS/QUESTIONS**

**THANK YOU!**



**FY 22 Community Health Needs  
Assessment (CHNA)**

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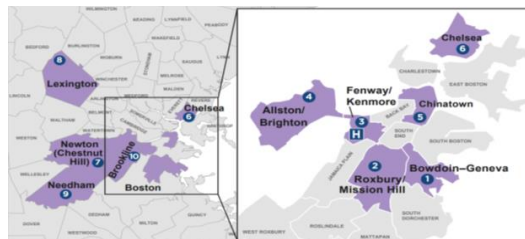
## Community Health Needs Assessment & Implementation Strategy

### Goals

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- Understand and address the prioritized health-related and social services needs of those living in BIDMC's Community Benefits Service Area (CBSA) with an emphasis on populations impacted by inequities
  - Engage deeply with community-based organizations, community leaders, and community residents to ensure the project is collaborative and engaging
- Meet all requirements set forth for non-profit hospitals by the MA Attorney General's Office and IRS
- Increased focus on prioritizing needs and solutions identified by the community



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Medical Center



## Community Health Needs Assessment and Implementation Strategy

### Guiding Principles

Beth Israel Lahey Health



**Equity:** Work toward the systemic, fair and just treatment of all people; engage cohorts most impacted by COVID-19



**Collaboration:** Leverage resources to achieve greater impact by working with community residents and organizations; Boston CHNA-CHIP Collaborative, North Suffolk iCHNA



**Engagement:** Intentionally outreach to and interact with hardly reached populations; including but not limited to people impacted by trauma, people with disabilities, communities most impacted by inequities, and others



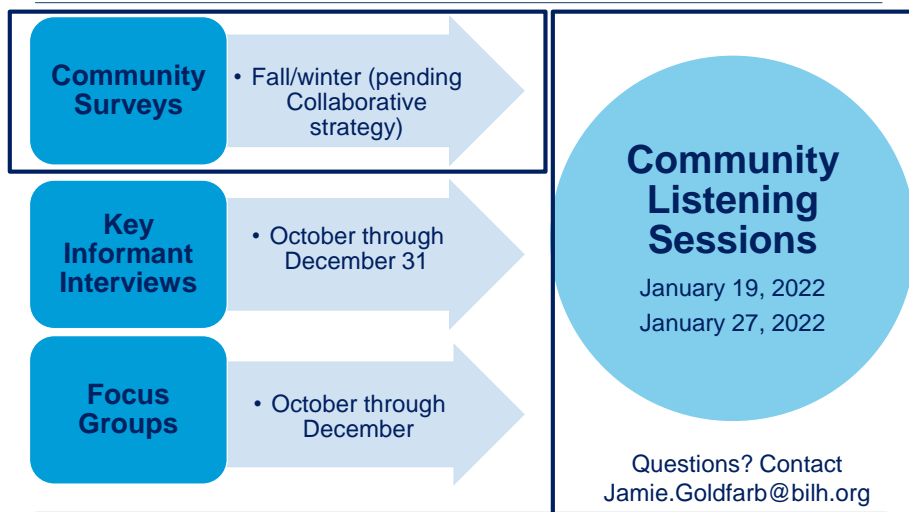
**Capacity Building:** Build community cohesion and capacity by co-leading Community Listening sessions and training community residents on facilitation

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## Community Health Needs Assessment and Implementation Strategy Timeline and Opportunities for Engagement



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## Community Health Needs Assessment and Implementation Strategy Community Engagement and Collaboration



- **Community Surveys:**
  - Collection will take place beginning this fall
  - Will be available in: Armenian, Cape Verdean, Haitian Creole, Hindi, Khmer, Portuguese, Russian, Simplified Chinese, Spanish, Traditional Chinese, Vietnamese |
  - Please share the survey link with your networks
- **Future Listening Sessions:**
  - Wednesday, January 19, 2022
  - Thursday, January 27, 2022
- **Regional Collaboration:**



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## Community Health Needs Assessment and Implementation Strategy

### Capacity Building

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- **John Snow, Inc. (JSI)**  
Public health and health system consultants and researchers driven by a passion to improve health services and health outcomes for all



- **Seeking Volunteers for Community Facilitator Training**

- Community partners and residents are invited to attend a workshop to learn to co-facilitate a focus group and/or a community listening session breakout group.
- JSI will conduct workshops on:
  - [Wednesday Oct 6](#), 9-10 AM (*focus group*)
  - [Thursday Oct 7](#), 3-4 PM (*focus group*)
  - [Tuesday, Jan 11](#), 2-3 PM (*listening session*)
- Those who complete the workshop and are asked to co-facilitate will receive a small stipend.

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Medical Center

## BIDMC Community Benefits Team

### Contact Information and Additional Information

Beth Israel Lahey Health 

#### BIDMC Community Benefits Team:

- Robert Torres: [Robert.Torres@bilh.org](mailto:Robert.Torres@bilh.org)
- Jamie Goldfarb: [Jamie.Goldfarb@bilh.org](mailto:Jamie.Goldfarb@bilh.org)
- Anna Spier: [Anna.Spier@bilh.org](mailto:Anna.Spier@bilh.org)

#### Learn more! Get involved!

- BILH survey: <https://survey.jsi.com/s3/BILHsurvey2021>
- Community-based Health Initiative: [bidmc.org/chi](http://bidmc.org/chi)
- Boston CHNA-CHIP Collaborative (B3C): [bostonchna.org](http://bostonchna.org)
- North Suffolk Integrated Community Health Needs Assessment: [northsuffolkassessment.org/](http://northsuffolkassessment.org/)

Next BIDMC Community Benefits Advisory Committee Meeting is  
December 14, 2021 from 5-7 pm

**Thank you!**

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Medical Center

June 22, 2021  
Meeting Minutes

## **Community Benefits Advisory Committee (CBAC)**

### **Meeting Minutes**

**Tuesday, June 22, 2021, 5:00 PM - 7:00 PM**

#### **Held Virtually Via Zoom**

**Present:** Flor Amaya, Walter Armstrong, Elizabeth (Liz) Browne, Tina Chery, Alexandra Chery Dorrelus, Shondell Davis, Lauren Gabovitch, Richard Giordano, Nancy Kasen, Barry Keppard, Phillomin Laptiste, Angie Liou, Danelle Marable, Kelly McCarthy, Sandy Novack, Holly Oh, MD, Jane Powers, Melody Route-Satchell, Anna Spier, Robert Torres, LaShonda Walker-Robinson, Fred Wang

**Absent:** James Morton, Alex Oliver-Dávila, Joanne Pokaski, Triniese Polk, Richard Rouse

**Guests:** Annie Rushman, Health Resources in Action (HRiA), Senior Associate

One member of the public was also in attendance.

#### **Welcome**

Nancy Kasen, Vice President, Community Benefits and Community Relations, Beth Israel Lahey Health (BILH), welcomed everyone to the meeting and thanked them for joining. Nancy then reviewed the agenda.

Nancy welcomed Melody Route-Satchell, a Practice Manager at BIDMC, as a new member to the Community Benefits Advisory Committee (CBAC).

Nancy also welcomed Alexandra Chery Dorrelus, the Director of Programs and Training at The Louis D. Brown Peace Institute, as a new member to the CBAC. Nancy thanked Tina Chery for her service on the CBAC.

Nancy then informed the CBAC that Dr. Holly Oh was transitioning off of the committee and thanked her for her service to The Dimock Center and the CBAC. She also mentioned that Kira Khazatsky, the Chief Operating Officer at JVS, would be joining the CBAC at the next meeting to fill the role previously held by Jerry Rubin.

The minutes from the March 23rd CBAC meeting were reviewed and accepted.

#### **Public Comment Period**

There were no oral or written public comments shared during this meeting.

#### **Community-based Health Initiative (CHI) Updates**

##### ***Housing Investment:***

Nancy began the discussion by noting that in 2019, Dr. Megan Sandel from Boston Medical Center (BMC) presented to the CBAC about the Innovative Stable Housing Initiative (ISHI). ISHI consists of three funding streams: Flex Fund, Upstream Fund, and Resident-led Fund. The ISHI fund was established with initial commitments from BMC, Boston Children's Hospital, and Brigham and Women's Hospital (BMC and Boston Children's investments were made under previous Determination of Need guidelines).

As part of the Determination of Need CHI submission, BIDMC, at the recommendation of the CBAC, planned to invest \$1 million in the ISHI over 5 years (\$750,000 to the Flex Fund and \$250,000 to the

Upstream Fund). BIDMC has been working collaboratively with ISHI since 2019 to learn more about ISHI's governance structure, current investments, and future plans. Nancy reminded the CBAC that BIDMC feels a significant responsibility to be good stewards of the NIB CHI funds and is committed to having as much of the funding as possible reach the end beneficiaries (residents).

Robert Torres, Director of Community Benefits, Boston Region, BILH, then reviewed the initial findings from the Flex Fund, which were intended as housing stability funds of last resort (i.e., for use if someone was unable to access any other rental assistance funding). He shared how the COVID-19 pandemic has significantly changed the landscape of flexible rental assistance funding for residents of Massachusetts. Due to COVID-19, the needs have increased substantially; local, state, and federal funding have all been augmented significantly as a result. For instance, Rental Assistance for Families in Transition (RAFT), had a maximum contribution of \$4,000 prior to COVID-19 and has since increased their maximum contribution to \$10,000. Programs like Emergency Rental and Mortgage Assistance (ERMA) and the federal housing stability fund Emergency Rental Assistance Program (ERAP) were formed as well. The City of Boston and philanthropic funding sources have also been created to meet the increased demand for rental assistance. Governor Baker has also announced plans to invest approximately \$1 billion to increase affordable housing and home ownership among those most impacted by the COVID-19 pandemic.

As a result of these unanticipated changes, several of ISHI's Flex Fund grantees did not spend all of their awarded funds during the grant period and requested no-cost extensions. The ISHI Planning Committee is currently working on finalizing their plans to modify the Flex Fund; one of the initial proposed recommendations is to increase the allowable amount for administrative costs from 25% to 40%.

Robert also shared that the Upstream Fund had distributed funds to a diverse array of coalitions and seemed to be meeting its aims. In particular, the Upstream Fund had successfully fostered a learning community that was making a real positive impact.

Robert then presented potential paths forward for consideration and discussion by and with the CBAC regarding the BIDMC existing NIB CHI ISHI investment: maintaining the planned ISHI investment, investing in a Healthy Neighborhood Equity Fund (or similar fund), rolling the funds into the next Community-based Health Initiative (CHI) Request for Proposals (RFP) in 2023, or making a targeted investment in a specific development(s). He shared initial thoughts on the various strengths and risks related to these different investments, including ability to leverage additional resources, alignment with BIDMC's Community Benefits Service Area, and the likely level of oversight that BIDMC's Allocation Committee would have. BIDMC's recommendation was also to maintain the previous commitment of \$250,000 for the Upstream Fund. A robust discussion ensued.

CBAC members discussed various options and asked clarifying questions related to the timeline, process, and potential options. One member suggested increasing the amount of funding for the ISHI Upstream Fund from \$250,000 to \$500,000. Another member suggested a "blended" approach that would allocate funding to multiple specific projects. Several members noted the value of having oversight over the funding to be able to monitor and report on impact to key stakeholders.

### *Voting*

The CBAC then took two sequential votes on how to proceed based on the options that had been proposed and discussed. The CBAC first voted on whether to allocate an additional \$250,000 to the ISHI Upstream Fund to make the total investment \$500,000. A motion for this allocation was made and seconded. The CBAC unanimously voted for the increased allocation to the ISHI Upstream Fund.



Anna Spier, Manager of Community Benefits, BIDMC, then launched an anonymous poll with three response options for how to invest the remaining \$500,000 in housing funds: investing in one specific project, the “blended” approach of making several smaller investments, or investing the funds back into the next round of the CHI RFP. The majority of respondents (62%) selected the option to invest the funds in the next round of the RFP, while 23% and 16% chose the focused investment and multiple investment options, respectively. The members were asked if they wanted to continue the discussion or take a vote; the CBAC decided to proceed with a vote on the RFP option. A motion for this allocation was made and seconded. The CBAC unanimously voted to allocate the remaining \$500,000 in housing funds previously allocated to the ISHI Flex Fund to the following CHI RFP cycle.

BIDMC reiterated that pending dialogue with the Massachusetts Department of Public Health, the recommendation of the CBAC is to move \$500,000 that was previously earmarked for the Flex Fund to the next CHI RFP funding cycle in 2023 and move \$250,000 to ISHI’s Upstream Fund (increasing the total allocation to the Upstream Fund to \$500,000).

### ***Healthy Neighborhoods Initiative:***

Anna shared a brief update on the Bowdoin/Geneva and Fenway/Kenmore Community Collectives that were selected through the first round of BIDMC’s Healthy Neighborhoods Initiative. The Collectives are new coalitions that have come together to facilitate a community-led process and represent a diverse array of organizations and residents.

The Collectives have begun planning their community engagement efforts, with technical assistance from John Snow, Inc. and independent evaluation support from a small business owned by a woman of color (MXM Research Group). The Collectives will develop a project and evaluation plan over the summer using information gathered during community engagement activities and start their projects as early as September 2021.

### **Community-based Health Initiative (CHI) Evaluation Overview**

Anna then reviewed highlights from the evaluation of the CHI conducted by Health Resources in Action. In general, CBAC members were satisfied with the transparency of the meetings and the outreach conducted, and agreed that the funding opportunities were responsive to community needs in light of COVID-19. Several members also noted some of the drawbacks of holding meetings virtually, such as the difficulty of simultaneously participating in the meeting and viewing meeting materials, though others appreciated the convenience of meeting remotely.

Anna also shared planned improvements based on the evaluation results, such as tailored onboarding for new members, reviewing the charter annually, and making CBAC meetings more interactive. Next, Anna went over the strengths and opportunities for improvement reported by the Allocation Committee members and shared the changes that would be implemented moving forward.

### **CT Scanner Determination of Need (DoN) Update**

Nancy shared that the DoN application for a new CT scanner was submitted to the Massachusetts Department of Public Health (DPH) in May 2021. The CT scanner will enable back-up imaging capability on BIDMC’s East Campus and improve patient access. The total amount of the CHI for this DoN is \$239,769.40. Pending approval by DPH, these funds will be rolled over into the current CHI priority allocations (Note: DPH approval received on June 24, 2021).

## **FY22 Community Health Needs Assessment (CHNA) and Implementation Strategy (IS)**

Robert provided an update on the FY22 Community Health Needs Assessment (CHNA) and Implementation Strategy (IS). Every not-for-profit hospital undertakes the CHNA and IS process every three years. For this cycle, key strategies include: evidence-based community engagement strategies that recognize the disproportionate impact of COVID-19 on certain communities, applying a racial equity lens and using an asset-based approach, focused data collection, increasing the time allotted for prioritization, and aligning efforts across the BILH system.

Robert also provided an overview of the planning process, how information will flow between key stakeholders, and the timeline with key milestones. The CBAC then discussed specific organizations and individuals that could help support efforts to engage the “hardly reached” focus populations for the CHNA and IS. CBAC members provided specific outreach suggestions verbally and via the Zoom chat function and Robert mentioned that additional input could be sent after the meeting. He also shared how BIDMC would be collaborating with other regional CHNA/IS efforts with the goal of streamlining efforts and minimizing the burden on communities.

## **Beth Israel Lahey Health (BILH) Updates**

Nancy shared that Juan Fernando Lopera recently joined BILH as the new Chief Diversity, Equity, and Inclusion Officer. Juan will be overseeing the implementation of BILH’s Diversity, Equity, and Inclusion Roadmap. Nancy then reviewed the recent food security and housing stability investments BILH made in the gateway municipality of Brockton. These investments were made in close collaboration with the City of Brockton.

Danelle Marable, Director of Evaluation and Data, Community Benefits and Community Relations, BILH, introduced herself and provided information about a series of evaluation capacity building workshops she is offering to programs and organizations that BILH supports. CBAC members are also encouraged to attend. The workshops are intended to improve program planning and increase outcome measurement. The program also helps address an equity issue—many smaller organizations do not have access to funds to support evaluation capacity building yet are expected to report on progress. More information about the workshops, including links to the recordings of the sessions that have already taken place, will be provided after the meeting.

## **Adjourn**

BIDMC will send a reminder email to any CBAC member that has not yet completed their Conflict of Interest forms. Nancy thanked the attendees for joining the meeting and reminded everyone that the next scheduled meeting is September 28, 2021 from 5-7 pm. The 2022 meeting schedule was also shared.